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APPLICANTS

Wayne Cannon, Petaluma, CA;
 S. Daniel James, Herndon, VA;
 Sean Mountcastle, Herndon, VA;
 Anita Recharla, Herndon, VA;
 Rich Verjinski, Herndon, VA;
 Rudy Zulkarnain, Herndon, VA;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		CA	8	18	4

ADDRESS

Cindy S. Kaplan
 P.O. BOX 2448
 SARATOGA, CA 95070
 UNITED STATES

TITLE

Network element management

FILING FEE RECEIVED 1004	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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